## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000027091 (3)

PAULGATE HOLDINGS, INC.

**FILED** May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
2875 N.E. 191ST 6T. SUTIE 404 N MIAMI BEACH FL 331B0		2875 N.E. 1918T ST. SUTIE 404 N MIAMI BEACH FL 33180			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
						03/27/1996
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number 65-0664 7-68 Applied For	
Suite, Apt. #, etc.		26 Coite And Wash				APPLIED FOR Not Applicable
22		Suite, Apt. #, etc.	27			Cortificate of Status Desired     Sa.75 Additional     Fee Regulred
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible
24 25 25 Pame and Address of Current			30			Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent
				31 N	Name	TO, Figure and Address of from Hagisteres Again
	75 N.E. 191ST ST.		82 Street Ad		Street Address	ss (P.O. Box Number is Not Acceptable)
	ITE <b>4</b> 04				MIEGI AUGIOS	is (r.o. box Number is Not Acceptable)
N I	MIAMI BEACH FL 33180		8	33	•	
			8	34 0	City	₽₽₽ 85 Zip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1509 Florida Statutes, the above named once					amod corpor	FL 63 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.						
SIGNATURE Signature typed or printed results of rigidized signal and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND		13.	Agent s	ignature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 11111	 E		Change Addition
NAME	GOLDLIST, ISADORE		1.2 NAME			
STREET ADDRESS	12 GOLDFINCH COURT		1.3 STREET A		DRESS	
CITY-ST-ZIP	WILLOWDALE ON M2R -2C3		1.4 City-St-ZiP		IP .	
TITLE	VPS	☐ DELETE	2.1 THLF			☐ Change ☐ Addition
NAME	GOLDLIST, HARRY		22 NAM			
STREET ADDRESS	12 GOLDFINCH COURT WILLOWDALE ON M2R -2C3		2.3 STRE		·	* ·
CITY-ST-ZIP TITLE	WILLOWOALE ON MEN 1203	DELETE	2. 4 CITY - ST- 3.1 TITLE		1112	Change Addition
NAME			3.2 NAME			E.J Olongo E.J Roshion
STREET ADDRESS				3.3 STREET ADDRESS		i
CITY-ST-ZIP		3.4.		y-\$1-Z	IIP III	
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS			4.3 STRE		Į.	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST		P	Change Addition
NAME		L.J VILLIL	5.1 TITLE 5.2 NAME			LI Change LI Adollon
STREET ADDRESS	·		5.3 STRE		RESS	
CITY-ST-ZIP			5.4 CITY		1	
TITLE		DELETE	61 TITLE			Change Addition
NAME			62 NAM	E	ļ	
STREET ADDRESS			63 STRE	ET ADD	PRESS	
CiTY-ST-ZIP	certify that the information supplied will	th this filing does not qualify for	64 CITY			ection 119.07(3)(i). Florida Statutes, I further certify that the information

indicated on this annual report or supplicmental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.